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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Diane First name R Middle name Landry Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0438	

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Debtor 1 Diane R Landry

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		330 E Rice Road Gardner, IL 60424				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Grundy				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Document Case number (if known) Debtor 1 Diane R Landry

Part	2: Tell the Court About	Your B	ankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are				n of each, see <i>Notice Re</i> of page 1 and check the a		342(b) for Individuals Filir	ng for Bankruptcy
	choosing to file under	■ Chapter 7						
		□с	hapter 11					
		□с	hapter 12					
		□с	hapter 13					
8.	How you will pay the fee	•	about how yo	u may pay. Ty attorney is sub	pically, if you are paying	the fee yourself, you n	erk's office in your local con nay pay with cash, cashie rney may pay with a credi	er's check, or money
☐ I need to pay the fee in installmen The Filing Fee in Installments (Office				e this option, sign and	attach the Application for	Individuals to Pay		
I request that my fee be waived (You may request this option only if you are filing for Ch but is not required to, waive your fee, and may do so only if your income is less than 150%					are filing for Chapter 7. B	y law, a judge may,		
			applies to you	ır family size a	ind you are unable to pay	the fee in installments	s). If you choose this option	on, you must fill out
			the Application	n to Have the	Chapter 7 Filing Fee Wa	nived (Official Form 103	3B) and file it with your pe	tition.
9.	Have you filed for bankruptcy within the	■ No	O.					
	last 8 years?	☐ Ye	es.					
			District		When			
			District		When		_ Case number	
			District		When		Case number	
10.	Are any bankruptcy	■ No	2					
	cases pending or being filed by a spouse who is	□ Ye						
	not filing this case with you, or by a business partner, or by an affiliate?		55.					
			Debtor				Relationship to you	
			District		When		Case number, if known	
			Debtor				Relationship to you	
			District		When		Case number, if known	
11.	Do you rent your residence?	■ No	Go to I	ine 12.				
	. John College	□Y€	es. Has yo	ur landlord obt	tained an eviction judgme	ent against you?		
				No. Go to line	12.			
				Yes. Fill out <i>II</i> this bankrupto		n Eviction Judgment Ag	gainst You (Form 101A) a	nd file it as part of

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Deb	otor 1	Diane R Landry	37007	DUC I	Document	Page 4 of 54 Case number (if known)	
Par	t 3:	Report About Any Bu	ısinesses \	You Own as	a Sole Proprietor		
12.	of a	you a sole proprietor ny full- or part-time iness?	■ No.	Go to Pa	rt 4.		
			☐ Yes.	Name an	d location of business		
	busi an ir sepa as a	ole proprietorship is a ness you operate as ndividual, and is not a arate legal entity such corporation, nership, or LLC.			business, if any		
	If wo	u have more than and		Number,	Street, City, State & ZIP	Code	

Check the appropriate box to describe your business:

Health Care Business (as defined in 11 U.S.C. § 101(27A))

Stockbroker (as defined in 11 U.S.C. § 101(53A))

Commodity Broker (as defined in 11 U.S.C. § 101(6))

Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business

debtor?

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).

I am not filing under Chapter 11. No.

None of the above

I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No.

I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

No.

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Diane R Landry

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Diane R Landry		Document	———	Case number (if)	known)
Part	6: Answer These Quest	ions for Rep	orting Purposes			
16.	What kind of debts do you have?		re your debts primarily consundividual primarily for a personal,			in 11 U.S.C. § 101(8) as "incurred by an
			No. Go to line 16b.			
			Yes. Go to line 17.			
			re your debts primarily busines oney for a business or investmen			
			No. Go to line 16c.			
			Yes. Go to line 17.			
		16c. S	tate the type of debts you owe that	at are not consumer of	debts or business de	ebts
17.	Are you filing under Chapter 7?	□ No. I	am not filing under Chapter 7. Go	to line 18.		
	Do you estimate that after any exempt property is excluded and		am filing under Chapter 7. Do you re paid that funds will be available			is excluded and administrative expenses
	administrative expenses are paid that funds will		No			
	be available for distribution to unsecured creditors?		l Yes			
18.	How many Creditors do	1 -49		1 ,000-5,000		2 5,001-50,000
	you estimate that you owe?	□ 50-99		☐ 5001-10,000		50,001-100,000
		□ 100-199 □ 200-999		□ 10,001-25,000		☐ More than100,000
19.	How much do you	\$ 0 - \$50,	.000	□ \$1,000,001 - \$10) million	☐ \$500,000,001 - \$1 billion
	estimate your assets to be worth?	□ \$50,001	- \$100,000	□ \$10,000,001 - \$5		□ \$1,000,000,001 - \$10 billion
			1 - \$500,000 1 - \$1 million	□ \$50,000,001 - \$1 □ \$100,000,001 - \$		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
20.	How much do you	\$ 0 - \$50,	000	□ \$1,000,001 - \$10) million	□ \$500,000,001 - \$1 billion
	estimate your liabilities to be?	□ \$50,001		□ \$10,000,001 - \$5		□ \$1,000,000,001 - \$10 billion
			1 - \$500,000 1 - \$1 million	□ \$50,000,001 - \$1 □ \$100,000,001 - \$		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		— \$300,00	1 - \$1 IIIIIIOII			
Part	7: Sign Below					
For	you	I have exam	nined this petition, and I declare u	inder penalty of perju	ry that the information	on provided is true and correct.
			osen to file under Chapter 7, I am es Code. I understand the relief a			der Chapter 7, 11,12, or 13 of title 11, ee to proceed under Chapter 7.
			y represents me and I did not pay have obtained and read the notice			attorney to help me fill out this
		I request rel	ief in accordance with the chapte	r of title 11, United S	tates Code, specifie	d in this petition.
		bankruptcy and 3571.	case can result in fines up to \$25			operty by fraud in connection with a s, or both. 18 U.S.C. §§ 152, 1341, 1519,
		/s/ Diane I Diane R L Signature of	andry	Sig	nature of Debtor 2	
		Executed or	∩ March 15, 2018	Fy	ecuted on	
			MM / DD / YYYY			D / YYYY

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Debtor 1 Diane R Landry Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Mark M. Berardi	Date	March 15, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Mark M. Berardi		
Law Offices of Jeffrey L. Fisher		
207 S. Water St.		
Wilmington, IL 60481 Number, Street, City, State & ZIP Code		
Contact phone 815-476-7635	Email address	Mberardilaw@gmail.com
6305463 IL		
Bar number & State		

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		Docume	ent Page 8 of 54	4	
Fill in this infor	mation to identify your	case:			
Debtor 1	Diane R Landry				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number _					Charle if this is an
(II KHOWH)					Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Par	1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	4,250.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	4,250.00
Par	12: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	33,320.00
	Your total liabilities	\$	33,320.00
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,656.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,599.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a nerconal	family or

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

4,914.33

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total claim	
Troil rait 4 on Schedule Lit, copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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		Document	Page 10 of 54					
information to identify your case and this filing:								

			Docu	ment Page 10 of 54			
Fill in this infor	mation to identify	your case and th	is filing:				
Debtor 1	Diane R Lan	dry Middle	Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle	Name	Last Name			
United States Ba	ankruptcy Court for	the: NORTHER	N DISTRI	CT OF ILLINOIS			
Case number						С	Check if this is an amended filing
	orm 106A/E	-					
Schedu	le A/B: Pı	operty					12/15
think it fits best. I information. If mo Answer every que	Be as complete and a re space is needed, strion.	accurate as possible attach a separate sh	e. If two m neet to this	nly once. If an asset fits in more than of arried people are filing together, both a form. On the top of any additional pagestate You Own or Have an Interest In	are equally respon	nsible for supp	lying correct
1. Do you own or	have any legal or eq	uitable interest in a	ny residen	ce, building, land, or similar property?	•		
☐ No. Go to Pa	art 2.						
Yes. Where	is the property?						
1.1 130 Lem r	mon Dr			the property? Check all that apply			
	s, if available, or other des	cription	_	Single-family home Duplex or multi-unit building	the amount of	f any secured o	ls or exemptions. Put laims on Schedule D:
				Condominium or cooperative	Creditors Wr	io Have Claims	Secured by Property.
South Wi	lmington IL	60474-0000		Manufactured or mobile home _and	Current valu		Current value of the portion you own?
City	State	ZIP Code		nvestment property	Uı	nknown	Unknown
				Fimeshare Other	_ (such as fee	simple, tenan	r ownership interest cy by the entireties, or
			_	s an interest in the property? Check one Debtor 1 only	Fee simp	-	
Grundy			_	Debtor 2 only			
County			_	Debtor 1 and Debtor 2 only			unity property
			Other in	At least one of the debtors and another of ormation you wish to add about this y identification number:	item, such as loc	,	
			ргорск	y racinimation number.			
				ur entries from Part 1, including a nere		>	\$0.00
Part 2: Describe	Your Vehicles						
				vehicles, whether they are regist hedule G: Executory Contracts and to			cles you own that
3. Cars, vans, t	rucks, tractors, sp	ort utility vehicles	s, motoro	cycles			
■ No							

☐ Yes

De	ebtor 1	Diane R Land	dry Docume	ent Page 11 (OT 54 Case number	(if known)	
		aft, aircraft, mot	or homes, ATVs and other recreation motors, personal watercraft, fishing ver				
	■ No						
	■ No □ Yes						
•	_ 100						
			the portion you own for all of your e d for Part 2. Write that number here				\$0.00
Pa	rt 3: Des	scribe Your Person	nal and Household Items				
	•	·	gal or equitable interest in any of th	e following items?			Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		old goods and fues: Major applian	ırnishings ces, furniture, linens, china, kitchenwar	·e			
	□ No						
	Yes.	Describe					
			Assorted household goods and	d furniture		1	\$1,000.00
_							
7.	Electron Example	es: Televisions ar	nd radios; audio, video, stereo, and dig phones, cameras, media players, gam		ers, printers, scanners	s; music col	lections; electronic devices
	■ No □ Yes	Describe					
8.			figurines; paintings, prints, or other art ns, memorabilia, collectibles	work; books, pictures, or	other art objects; sta	amp, coin, c	or baseball card collections;
	☐ Yes.	Describe					
	Example No	musical instru	graphic, exercise, and other hobby equ	ipment; bicycles, pool ta	ables, golf clubs, skis	s; canoes ar	nd kayaks; carpentry tools;
	⊔ Yes.	Describe					
10.	Firearm Examp		, shotguns, ammunition, and related ed	quipment			
	■ No						
	☐ Yes.	Describe					
	Clothes Examp □ No		thes, furs, leather coats, designer wea	r, shoes, accessories			
	Yes.	Describe					
			Necessary wearing apparel			1	\$750.00
			пососситу пошти д иррано.				
12.	_ ′		velry, costume jewelry, engagement rir	ngs, wedding rings, heirld	oom jewelry, watche	s, gems, go	ld, silver
	■ No □ Yes.	Describe					
13.		rm animals les: Dogs, cats, b	pirds, horses				
	■ No	20go, oaio, i	30,				
	☐ Yes.	Describe					

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Dobtor	Case 18-0		Doc 1	Filed 03/19/18 Document	Entered 03/19 Page 12 of 54		Desc Main
Debtor						ase number (if known)	
■ N	•		•	ı did not already list, in	cluding any health aid	ls you did not list	
				om Part 3, including ar		u have attached	\$1,750.00
Part 4:	Describe Your Finance	ial Assets					
Do you	own or have any le	gal or eq	uitable intere	est in any of the followi	ing?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ N	amples: Money you h		-	our home, in a safe depo	sit box, and on hand wh	en you file your petitio	on
Ex.	institutions. I			I accounts; certificates o ounts with the same inst	itution, list each.	lit unions, brokerage h	ouses, and other similar
■ Y	es			montation	arrio.		
		17.1.	Checking	One half o	of Grundy Bank		\$500.00
		17.2.	Savings	one half o	f Grundy Bank		\$2,000.00
	•			ks ith brokerage firms, mon	ey market accounts		
ΠY	es	lr	nstitution or is	suer name:			
joi	nt venture	ock and ir	nterests in in	corporated and uninco	orporated businesses,	including an interes	t in an LLC, partnership, and
■ N □ Y	o es. Give specific info		bout them e of entity:		%	% of ownership:	
Ne No ■ N	gotiable instruments i n-negotiable instrume	include pe ents are the rmation ab	rsonal checks lose you cann	negotiable and non-ne s, cashiers' checks, pron not transfer to someone b	nissory notes, and mone		
	irement or pension amples: Interests in IF	accounts		(k), 403(b), thrift savings	s accounts, or other pen	sion or profit-sharing	plans
■ N	0				·		
ПΥ	es. List each account		ly. account:	Institution na	ame:		
Yo	amples: Agreements	d deposits	you have ma	de so that you may cont rent, public utilities (elec			ies, or others
ΠY	es			Institution na	ame or individual:		
23. Anı ■ N		r a periodi	c payment of	money to you, either for	life or for a number of y	ears)	

		Case 18	8-07867	Doc 1	Filed 03/19/18 Document	Entered 03/19/18 13:08:34	Desc Main
De	btor 1	Diane R L	andry		Document	Page 13 of 54 Case number (if known)	
	☐ Yes		Issuer name	and descripti	on.		
	Interests 26 U.S.C	s in an educa C. §§ 530(b)(1	ation IRA, in a), 529A(b), ar	an account i nd 529(b)(1).	n a qualified ABLE pro	gram, or under a qualified state tuition pro	gram.
	■ No □ Yes		Institution na	me and desc	ription. Separately file th	ne records of any interests.11 U.S.C. § 521(c):	
	■ No	-	future intere		rty (other than anythin	g listed in line 1), and rights or powers exe	ercisable for your benefit
	Exampl ■ No	les: Internet d		s, websites, p	ts, and other intellecturoceeds from royalties a	nal property nd licensing agreements	
	<i>Exampl</i> ■ No	les: Building p	s, and other goermits, exclusion at information at	sive licenses,		n holdings, liquor licenses, professional licens	es
Mo	oney or p	property owe	d to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	unds owed to		oout them, inc	cluding whether you alre	ady filed the returns and the tax years	
	■ No	les: Past due	or lump sum a		usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
	Exampl ■ No	les: Unpaid w	unpaid loans	ty insurance p	payments, disability ben someone else	efits, sick pay, vacation pay, workers' compe	nsation, Social Security
		s in insuran les: Health, d		e insurance; h	nealth savings account (HSA); credit, homeowner's, or renter's insurar	nce
	_ `	Name the insu	•	iny of each po pany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
			Glob	e Term Life	e Insurance	Spouse	\$0.00
	If you and someon		ciary of a living		someone who has die t proceeds from a life in	ed surance policy, or are currently entitled to rec	eive property because
	Exampl ■ No	les: Accidents			you have filed a lawsui surance claims, or rights	it or made a demand for payment to sue	

Deb	or 1 Diane R Landry	Document	Page 14 of	54 Case number (if known)	Desc Main
24 (Other contingent and unliquidated claims of	ovorv naturo, includin	n countardaime	of the debter and rights to	set off claims
	No	every nature, including	y counterclaims	or the debtor and rights to	Set on ciains
	Yes. Describe each claim				
25	any financial assets you did not already list				
_	No				
	Yes. Give specific information				
				ſ	
36.	Add the dollar value of all of your entries fro for Part 4. Write that number here				\$2,500.00
Part	5: Describe Any Business-Related Property You (Own or Have an Interest I	n. List any real esta	ate in Part 1.	
37. D	o you own or have any legal or equitable interest in	n any business-related pi	roperty?		
	No. Go to Part 6.	,			
	Yes. Go to line 38.				
Part	6: Describe Any Farm- and Commercial Fishing-R If you own or have an interest in farmland, list it in		n or Have an Interes	st In.	
46. [o you own or have any legal or equitable int	terest in any farm- or o	ommercial fishir	ng-related property?	
	No. Go to Part 7.	·		,	
	Yes. Go to line 47.				
Part	Describe All Property You Own or Have an	n Interest in That You Did	Not List Above		
	Oo you have other property of any kind you d				
_	No	·			
	Yes. Give specific information				
5 4	Add the deller color of all of communities for	B 7 Males de se]	40.00
54.	Add the dollar value of all of your entries fro	om Part 7. Write that n	umber here		\$0.00
Part	List the Totals of Each Part of this Form				
rait					
55.	Part 1: Total real estate, line 2				\$0.00
56.	Part 2: Total vehicles, line 5		\$0.00		
57.	Part 3: Total personal and household items,	, line 15	\$1,750.00		
58. 59.	Part 4: Total financial assets, line 36 Part 5: Total business-related property, line		\$2,500.00 \$0.00		
60.	Part 6: Total farm- and fishing-related property		\$0.00		
61.	Part 7: Total other property not listed, line 5		\$0.00		
62.	Total personal property. Add lines 56 through	n 61	\$4,250.00	Copy personal property to	otal \$4,250.00
63.	Total of all property on Schedule A/B. Add lin	ne 55 + line 62			\$4,250.00

Official Form 106A/B Schedule A/B: Property page 5

	Case 18-07867	Doc 1 Filed 03	3/19/18 Entered 03/19/18 13:0 ment Page 15 of 54	08:34 Desc Main
Fill in this in	nformation to identify yo	our case:		
Debtor 1	Diane R Landry	,		
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing	First Name	Middle Name	Last Name	
United State	s Bankruptcy Court for the	e: NORTHERN DISTR	ICT OF ILLINOIS	
Case number	er			
(if known)				☐ Check if this is an amended filing
Official	Form 106C			
Sched	ule C: The P	roperty You	Claim as Exempt	4/16
Re as comple	ete and accurate as possib	ole. If two married people a	are filing together, both are equally responsible	for supplying correct information. Using

the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited

entify the Property You Claim as Eat of exemptions are you claiming the claiming state and federal nonbarrie claiming federal exemptions. 11 property you list on Schedule A/B cription of the property and line on A/B that lists this property d household goods and the Schedule A/B: 6.1	? Check one only, even hkruptcy exemptions. U.S.C. § 522(b)(2)	empt,	S.C. § 522(b)(3)	Specific laws that allow exemption 735 ILCS 5/12-1001(b)	
re claiming state and federal nonbar re claiming federal exemptions. 11 property you list on <i>Schedule A/B</i> rription of the property and line on <i>A/B</i> that lists this property	Nkruptcy exemptions. U.S.C. § 522(b)(2) S that you claim as execute control you own Copy the value from Schedule A/B	empt,	fill in the information below. count of the exemption you claim ck only one box for each exemption.		
re claiming federal exemptions. 11 property you list on Schedule A/B cription of the property and line on A/B that lists this property d household goods and	U.S.C. § 522(b)(2) B that you claim as execution you own Copy the value from Schedule A/B	empt,	fill in the information below. Dount of the exemption you claim ack only one box for each exemption.		
property you list on Schedule A/B cription of the property and line on A/B that lists this property d household goods and	B that you claim as exe Current value of the portion you own Copy the value from Schedule A/B	Amo	ount of the exemption you claim		
ription of the property and line on A/B that lists this property d household goods and	Current value of the portion you own Copy the value from Schedule A/B	Amo	ount of the exemption you claim		
d household goods and	portion you own Copy the value from Schedule A/B		ck only one box for each exemption.		
e	Schedule A/B	Che	·	725 II CS 5/42 4004/b)	
e	\$1,000.00		\$1.000.00	725 II CS 5/12 1001/b)	
-			* /	735 ILCS 3/12-1001(b)	
			100% of fair market value, up to any applicable statutory limit		
ary wearing apparel Schedule A/B: 11.1	\$750.00		\$750.00	735 ILCS 5/12-1001(a)	
Schedule AVD. 11.1			100% of fair market value, up to any applicable statutory limit		
ng: One half of Grundy Bank	\$500.00		\$500.00	735 ILCS 5/12-1001(b)	
Scriedule A/B. 17.1			100% of fair market value, up to any applicable statutory limit		
:: one half of Grundy Bank	\$2,000.00		\$2,000.00	735 ILCS 5/12-1001(b)	
Schedule AVD. 11.2			100% of fair market value, up to any applicable statutory limit		
	Schedule A/B: 17.1 one half of Grundy Bank Schedule A/B: 17.2 laiming a homestead exemption	Schedule A/B: 17.1 Tone half of Grundy Bank Schedule A/B: 17.2 Schedule A/B: 17.2 Iaiming a homestead exemption of more than \$160,375	g: One half of Grundy Bank Schedule A/B: 17.1 one half of Grundy Bank Schedule A/B: 17.2 \$500.00	g: One half of Grundy Bank Schedule A/B: 17.1 \$500.00 \$500.00 100% of fair market value, up to any applicable statutory limit one half of Grundy Bank Schedule A/B: 17.2 \$2,000.00 100% of fair market value, up to any applicable statutory limit	

Official Form 106C

No

Yes

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

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Debtor 1 Diane R Landry

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Ca	SC 10-07007	Document		u 03/13/10 13.0 7 of 5/1	0.54 Desc iv	iaiii
Fill in this inforn	nation to identify you		1 7000.17	(11.14		
Debtor 1						
Debior 1	Diane R Landry First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS			
Case number (if known)					_	if this is an led filing
000 11 5	4000					
Official Forn			_			
Schedule	D: Creditors	Who Have Claim	s Secure	d by Property	<u>y</u>	12/15
		If two married people are filing to out, number the entries, and attac				
. Do any creditors	have claims secured by	your property?				
☐ No. Check	this box and submit th	nis form to the court with your o	ther schedules. Y	ou have nothing else to	report on this form.	
Yes. Fill in	all of the information b	below.				
Part 1: List A	II Secured Claims					
		more than one secured claim, list the	e creditor separately	Column A	Column B	Column C
for each claim. If m	ore than one creditor has	a particular claim, list the other credital order according to the creditor's	ditors in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 BANK OF MELLON	NEW YORK	Describe the property that secu	res the claim:	Unknown	Unknown	Unknown
Creditor's Name	9	130 Lemmon Dr South W IL 60474 Grundy County	ilmington,			
225 Libert	•	As of the date you file, the claim				
Attn Bank		apply.	113. Check all that			
	, NY 10286	Contingent				
Number, Street	, City, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the de	ebt? Check one.	Nature of lien. Check all that ap	ply.			
■ Debtor 1 only		☐ An agreement you made (such	· -	cured		
Debtor 2 only		car loan)				
Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien	, mechanic's lien)			
☐ At least one of the	he debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this cl		☐ Other (including a right to offset	et)			
community de	ot					
Date debt was incu	urred	Last 4 digits of account r	number			
Add the dollar va	alue of your entries in Co	olumn A on this page. Write that I	number here:	•	0.00	
	=	the dollar value totals from all pa		-		
Write that number	er here:			•	0.00	
Part 2: List Oth	ners to Be Notified fo	r a Debt That You Already Lis	ted			
trying to collect fro than one creditor f	om you for a debt you o	e notified about your bankruptcy we to someone else, list the cred you listed in Part 1, list the addit is page.	itor in Part 1, and tl	hen list the collection ag	ency here. Similarly, if	you have more
Π						
	ber, Street, City, State & 2 nd Association	Zip Code	On which	ch line in Part 1 did you er	nter the creditor? 2.1	
	N Frontage Rd		Last 4 o	digits of account number _		

Willowbrook, IL 60527

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· ·	430 10 01001 2	Document	Page 18 of 54	70.04 Described
Fill in this info	rmation to identify your o			
Debtor 1	Diane R Landry			
Debtor 1	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing
	E/F: Creditors W	ho Have Unsecured		12/15 ONPRIORITY claims. List the other party to
Schedule G: Exect Schedule D: Cred eft. Attach the Co name and case n	cutory Contracts and Unexpi litors Who Have Claims Sect ontinuation Page to this pag umber (if known).	ired Leases (Official Form 106G). Dured by Property. If more space is ne. If you have no information to rep	o not include any creditors with partiall needed, copy the Part you need, fill it ou	3: Property (Official Form 106A/B) and on ly secured claims that are listed in at, number the entries in the boxes on the e top of any additional pages, write your
	All of Your PRIORITY Un			
	itors have priority unsecured	d claims against you?		
No. Go to	Part 2.			
☐ Yes.	All (V NONDRIGHT			
	All of Your NONPRIORIT			
	itors have nonpriority unsec			
□ No. You h	nave nothing to report in this pa	art. Submit this form to the court with y	your other schedules.	
Yes.				
unsecured cla	aim, list the creditor separately	for each claim. For each claim listed,	e creditor who holds each claim. If a cre, identify what type of claim it is. Do not list have more than three nonpriority unsecured	claims already included in Part 1. If more
				Total claim
4.1 Ameri	can Anesthesiology	Last 4 digits of acco	ount number	\$96.00
	rity Creditor's Name	When wee the debt	in a compad 2	
Bankr	ox 120153	When was the debt	incurred?	
	Rapids, MI 49528			
	Street City State Zlp Code	As of the date you f	ile, the claim is: Check all that apply	
Who inc	curred the debt? Check one.			
Debt	or 1 only	☐ Contingent		
☐ Debt	or 2 only	☐ Unliquidated		
☐ Debt	or 1 and Debtor 2 only	☐ Disputed		
☐ At le	ast one of the debtors and and	ther Type of NONPRIOR	ITY unsecured claim:	
☐ Chec	ck if this claim is for a comm			
debt	latina and talant talant 100 at 100		g out of a separation agreement or divorce	e that you did not
	aim subject to offset?	report as priority clair		lahan.
■ No		·	or profit-sharing plans, and other similar d	edis
☐ Yes		Other Specify		

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DCDIO	Dialie K Laliury	- Case Hamber (II know)					
4.2	Amsurg Surgery Center	Last 4 digits of account number	\$323.00				
	Nonpriority Creditor's Name 998 129th Infantry Drive Bankruptcy	When was the debt incurred?					
	Joliet, IL 60435	- As a Color of the districts Of the little of the					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify					
4.3	Cap1/marcs	Last 4 digits of account number 3338	\$1,073.00				
	Nonpriority Creditor's Name	On and 100/40 Least Asting					
	Po Box 30253 Salt Lake City, UT 84130	Opened 09/10 Last Active 9/01/17					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Charge Account					
4.4	Capital Accounts	Last 4 digits of account number 7020	\$1,235.00				
	Nonpriority Creditor's Name Po Box 140065 Nashville, TN 37214	When was the debt incurred? Opened 08/17					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No						
	<u> </u>	_ Collection Attorney Weber Micetich					
	□Yes	Other. Specify Chiropractic					

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Case number (if know) Debtor 1 Diane R Landry 4.5 \$1,967.00 Capital One Last 4 digits of account number 9911 Nonpriority Creditor's Name Opened 12/05 Last Active 15000 Capital One Dr When was the debt incurred? 12/02/17 Richmond, VA 23238 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.6 **Capital One** 5254 Last 4 digits of account number \$1,554.00 Nonpriority Creditor's Name Opened 01/14 Last Active 15000 Capital One Dr When was the debt incurred? 12/08/17 Richmond, VA 23238 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.7 Cda/pontiac Last 4 digits of account number 1844 \$4.898.00 Nonpriority Creditor's Name 415 E Main St When was the debt incurred? Opened 12/14/12 Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Morris Hospital ☐ Yes

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4.8	City of Kankakee	Last 4 digits of account number	\$182.00
	Nonpriority Creditor's Name PO Box 1053 Bankruptcy	When was the debt incurred?	
	Mokena, IL 60448		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	e e e e e e e e e e e e e e e e e e e	
	□ Yes	Other. Specify	
4.9	Coll ProfsnI Nonpriority Creditor's Name	Last 4 digits of account number 7364	\$3,062.00
	Po Box 416 La Salle, IL 61301	When was the debt incurred? Opened 2/09/15	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other Specify Ipd Inst Personal Developme	
		· /	
4.1 0	Collection Professiona	Last 4 digits of account number	\$2,005.00
	Nonpriority Creditor's Name Po Box 416 La Salle, IL 61301	When was the debt incurred? Opened 12/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_	П	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Collection Attorney Shorewood Family Other. Specify Dental Care	

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Debtor 1 Diane R Landry Case number (if know) 4.1 **Collection Professionals Inc** \$1,602.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 517 When was the debt incurred? **Bankruptcy** La Salle, IL 61301 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.1 Comenity Bank/Inbryant 2601 \$165.00 Last 4 digits of account number 2 Nonpriority Creditor's Name Opened 12/15 Last Active Po Box 182789 When was the debt incurred? 11/27/17 Columbus, OH 43218 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.1 Comenitybank/venus \$88.00 1723 Last 4 digits of account number Nonpriority Creditor's Name Opened 10/16 Last Active Po Box 182789 When was the debt incurred? 11/27/17 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Charge Account

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Case number (if know) Debtor 1 Diane R Landry 4.1 \$347.00 Comenitybank/victoria 4020 Last 4 digits of account number 4 Nonpriority Creditor's Name Opened 09/10 Last Active Po Box 182789 When was the debt incurred? 11/21/17 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes **Creditors Discount & A** 4559 \$2,500.00 Last 4 digits of account number Nonpriority Creditor's Name 415 E Main St When was the debt incurred? **Opened 07/15** Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Morris Family Dental ☐ Yes 4.1 **Creditors Discount & A** \$2.134.00 7932 Last 4 digits of account number 6 Nonpriority Creditor's Name 415 E Main St When was the debt incurred? **Opened 12/16** Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Epic Group Emerg** Other. Specify ☐ Yes **Physicians**

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Diane R Landry		Case number (if know)	
Creditors Discount & A	Last 4 digits of account number	5412	\$1,332.00
Nonpriority Creditor's Name 415 E Main St	When was the debt incurred?	Opened 10/14	
Streator, IL 61364 Number Street City State Zlp Code	As of the date you file, the claim		
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed	d alatan	
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	<u></u>	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharir	g plans, and other similar debts	
□ Yes	Other. Specify Collection	•	
Creditors Discount & A	Last 4 digits of account number	5522	\$1,118.00
Nonpriority Creditor's Name 415 E Main St Streator, IL 61364	When was the debt incurred?	Opened 10/14	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.		,	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Collection	Attorney Morris Hospital	
Creditors Discount & A	Last 4 digits of account number	3957	\$934.00
Nonpriority Creditor's Name 415 E Main St Streator, IL 61364	When was the debt incurred?	Opened 12/13	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	Collection Other. Specify Physicians	Attorney Epic Group Emerg	

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Case number (if know) Debtor 1 Diane R Landry 4.2 **Creditors Discount & A** 9498 \$812.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 415 E Main St When was the debt incurred? **Opened 10/15** Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Morris Hospital ☐ Yes 4.2 **Creditors Discount & A** 4008 \$743.00 Last 4 digits of account number Nonpriority Creditor's Name 415 E Main St When was the debt incurred? **Opened 12/13** Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Epic Group Emerg** ☐ Yes Other. Specify **Physicians** 4.2 **Creditors Discount & A** 8849 \$492.00 Last 4 digits of account number Nonpriority Creditor's Name 415 E Main St When was the debt incurred? **Opened 11/11** Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Epic/Morris Hosp ☐ Yes Other. Specify **Emerg Phys**

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Case number (if know) Debtor 1 Diane R Landry 4.2 **Creditors Discount & A** 2559 \$469.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 415 E Main St When was the debt incurred? **Opened 08/13** Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Grundy Radiologists** ☐ Yes Other. Specify 4.2 **Creditors Discount & A** \$327.00 6778 Last 4 digits of account number Nonpriority Creditor's Name 415 E Main St When was the debt incurred? **Opened 11/14** Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Epic Group Emerg ☐ Yes Other. Specify **Physicians** 4.2 **Creditors Discount & A** 0543 \$152.00 Last 4 digits of account number Nonpriority Creditor's Name 415 E Main St When was the debt incurred? **Opened 04/16** Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Grundy Radiologists Other. Specify Inc ☐ Yes

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Case number (if know)

DCDIC	Dialie & Lalluly		
4.2	Epic Group SC	Last 4 digits of account number	\$2,139.00
	Nonpriority Creditor's Name PO Box 120153 Bankruptcy	When was the debt incurred?	
	Grand Rapids, MI 49528 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
	<u> </u>		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2	Joliet Radiological		\$427.00
7	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ421.00
	36910 Treasury Center	When was the debt incurred?	
	Bankruptcy		
	Chicago, IL 60694		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2	Mediacom	Last 4 digits of account number	\$316.00
8	Nonpriority Creditor's Name		• • • • • • • • • • • • • • • • • • • •
	3900 26th Ave	When was the debt incurred?	
	Bankruptcy		
	Moline, IL 61265 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
	Debtor 1 only	Поли	
		☐ Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
		report as priority claims	
	No No	Debts to pension or profit-sharing plans, and other similar debts	
	∏ Ves	Other Cresify	

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4.2	Diane		•		Od3C I	idifibel (ii			
9			m Private School	Last 4 digits of account number			_		\$340.00
	PO Box Bankru	439		When was the debt incurred?					
	Bogue	Chit	to, MS 39629						
			City State Zlp Code he debt? Check one.	As of the date you file, the claim	is: Check	all that ap	pply		
	Debtor	1 onl	V	☐ Contingent					
	☐ Debtor		•	☐ Unliquidated					
	_		d Debtor 2 only	☐ Disputed					
			of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
			s claim is for a community	☐ Student loans					
	debt	. II UIII	s ciaini is ioi a community	☐ Obligations arising out of a sepa	aration ac	reement o	r divorce that you did	not	
	Is the clai	im sul	bject to offset?	report as priority claims			,		
	■ No			Debts to pension or profit-sharing	ng plans,	and other	similar debts		
	☐ Yes			Other. Specify					
4.3	Piversi	do M	edical Center	Local delimites of account assembles					\$488.00
0		y Cred	litor's Name	Last 4 digits of account number When was the debt incurred?			_		Ψ400.00
	Bankru Toledo,	OH	43607						
			City State ZIp Code he debt? Check one.	As of the date you file, the claim	is: Check	call that ap	oply		
	Debtor	1 onl	у	☐ Contingent					
	☐ Debtor	2 onl	у	☐ Unliquidated					
	☐ Debtor	1 and	d Debtor 2 only	☐ Disputed					
	☐ At leas	st one	of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
		if this	s claim is for a community	☐ Student loans					
	debt	im sul	bject to offset?	Obligations arising out of a separeport as priority claims	aration ag	reement o	r divorce that you did	not	
	■ No	iii Jui	oject to onset:	Debts to pension or profit-shari	ng plans.	and other:	similar debts		
	☐ Yes			Other. Specify					
Part 3:	Liet O	thora	to Be Notified About a Debt						
i. Use the is tryich have notifie	nis page on ing to colle more than ed for any o	nly if y ct from one c debts	rou have others to be notified ab m you for a debt you owe to som reditor for any of the debts that y in Parts 1 or 2, do not fill out or	out your bankruptcy, for a debt that be described in the original creditor in you listed in Parts 1 or 2, list the add submit this page.	Parts 1	or 2, then	list the collection ag	gency here. S	Similarly, if you
Part 4:			nounts for Each Type of Uns	ecured Claim s. This information is for statistical i	eporting	purposes	s only. 28 U.S.C. §159	9. Add the an	nounts for each
	of unsecure						, ,		
							Total Claim		
	Total	6a.	Domestic support obligations		6a.	\$		0.00	
cl from F	aims Part 1	6b.	Taxes and certain other debts	ou owe the government	6b.	\$	(0.00	
		6c.	Claims for death or personal in	·	6c.	\$		0.00	
		6d.	Other. Add all other priority unser	cured claims. Write that amount here.	6d.	\$		0.00	
		6e.	Total Priority. Add lines 6a throu	gh 6d.	6e.	\$	(0.00	
		6f.	Student loans		6f.	\$	Total Claim	0.00	
	Total					Ť —	•		
cl from F	aims Part 2	6g.	Obligations arising out of a sep	paration agreement or divorce that	6g.	\$	(0.00	

Official Form 106 E/F

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6h.	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 33,320.00
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 33,320.00

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		DOCUME	<u>ni Paue 30 0i 54</u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Diane R Landry			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the cr, Street, City, State and ZIP Co	contract or lease	State what the contract or lease is for
2.1					
	Name				-
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	City		State	ZIF Code	
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.4	<u> </u>				
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>

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		Docume	ent Page 31 d	OT 54	
Fill in this	information to identify your				
Debtor 1	Diane R Landry				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
	, ,	-			
Case numb (if known)	oer				☐ Check if this is an
					amended filing
Official	Form 106H				
	ule H: Your Cod	ebtors			12/15
ill it out, ar		boxes on the left. Attach	the Additional Page t		needed, copy the Additional Page, op of any Additional Pages, write
1. Do y	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	e as a codebtor.	
■ No					
☐ Yes					
	nin the last 8 years, have you a, California, Idaho, Louisiana				ty states and territories include)
■ No.	Go to line 3.				
☐ Yes	. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	sure you have listed t	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	P Code		Column 2: The cr Check all schedul	editor to whom you owe the debt
					,
3.1	Name			_ ☐ Schedule D, lir ☐ Schedule E/F.	
				☐ Schedule G, lir	
ī	Number Street			_	
(City	State	ZIP Code		
				D a	
3.2	Name			Schedule D, lir □ Schedule E/F,	·
				☐ Schedule G, lir	
ī	Number Street			_	
(City	State	ZIP Code		

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Fill	in this information to identify	/ vour ca	ase:					I			
		R Lan									
	btor 2		-								
Uni	ited States Bankruptcy Cour	t for the:	NORTHERN DISTRIC	T OF ILLIN	OIS						
	se number nown)								led filing nent show	ving postpetition e following date:	
0	fficial Form 106I	_						MM / DD/	YYYY		
S	chedule I: Your	Inco	ome								12/15
spo atta	plying correct information use. If you are separated a ch a separate sheet to this Describe Emplo Fill in your employment information.	and you s form. (r spouse is not filing wi	th you, do	not include ir	ıfor	matio	on about your sp I case number (i	oouse. If if known).	more space is	needed,
	If you have more than one	ioh	☐ Employed					_	■ Employed		
	attach a separate page wi information about addition employers.	th	Employment status	■ Not employed			☐ Not employed				
	Include part-time, seasona	al or	Occupation					Teams	ster		
	self-employed work.	ai, Oi	Employer's name					Rachk	e Pipino	g and Mechar	nical
	Occupation may include s or homemaker, if it applies		Employer's address						erry Dri IL 6043		
			How long employed the	nere?					4 month	าร	
Par	ft 2: Give Details Abo	out Mon	thly Income								
	mate monthly income as our use unless you are separate		ate you file this form. If y	ou have no	thing to report	for	any l	ine, write \$0 in th	e space.	Include your noi	n-filing
	ou or your non-filing spouse le e space, attach a separate s			mbine the i	nformation for	all e	emplo	oyers for that pers	on on the	e lines below. If y	you need
								For Debtor 1		Debtor 2 or filing spouse	
2.	List monthly gross wage deductions). If not paid m					2.	\$	0.00	\$	4,670.00	
3.	Estimate and list monthl	ly overti	me pay.			3.	+\$	0.00	+\$_	0.00	
4.	Calculate gross Income.	Add lin	e 2 + line 3.			4.	\$	0.00	\$	4,670.00	

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Debt	tor 1	Diane R Landry		(Case n	umber (if i	known)				
					For [Debtor 1			r Debtor n-filing s		
	Cop	y line 4 here	4.		\$		0.00	\$_	4	,670.00	<u> </u>
5.	List	all payroll deductions:									
	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify:	5a 5b 5c 5d 5e 5f. 5g 5h). - . -	\$		0.00 0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ +	1,	0.00 0.00 0.00 0.00 0.00 0.00 0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$		0.00	\$_	1	,014.00	<u>) </u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$		0.00	\$	3	,656.00	<u>)</u>
8.	8a. 8b. 8c. 8d. 8e. 8f.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify:	8f. 8g 8h). - - - -	\$\$ \$\$ \$\$ \$\$		0.00 0.00 0.00 0.00 0.00 0.00 0.00	\$ - \$ - \$ - \$ + \$		0.00 0.00 0.00 0.00 0.00 0.00	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.				0.00	\$_		0.0	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		0.00	+ \$_	3	,656.00	= \$ _	3,656.00
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe			•			Schedule	∍ J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							e. 12.	\$	3,656.00
13.	Do y	you expect an increase or decrease within the year after you file this form' No.	?							Combi month	ned ly income

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Fill i	in this information to identify your case:		1		
Debt	tor 1 Diane R Landry		Check	c if this is:	
				An amended filing	
Debt (Spo	tor 2buse, if filing)				ving postpetition chapter the following date:
Linite	ed States Bankruptcy Court for the: NORTHERN DISTRICT OF	ILLINOIS	_	MM / DD / YYYY	
Office	ed States Ballkruptcy Court for the. NORTHERN DISTRICT OF	ILLINOIS		MINI / DD / TTTT	
	e number nown)				
	fficial Form 106J				
	chedule J: Your Expenses				12/1
info	as complete and accurate as possible. If two married peo ormation. If more space is needed, attach another sheet to nber (if known). Answer every question.				
Part					
1.	Is this a joint case?				
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household?				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Exp	enses for Separate House	ehold of Debto	or 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information each dependent	•		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	son		18	Yes
					□ No
					☐ Yes ☐ No
					☐ Yes
					□ No
					☐ Yes
3.	Do your expenses include expenses of people other than				
	yourself and your dependents?				
Part	t 2: Estimate Your Ongoing Monthly Expenses				
exp	imate your expenses as of your bankruptcy filing date un enses as of a date after the bankruptcy is filed. If this is a licable date.				
the	lude expenses paid for with non-cash government assista value of such assistance and have included it on <i>Schedu</i> ficial Form 106l.)			Your expe	enses
, 5					
4.	The rental or home ownership expenses for your reside payments and any rent for the ground or lot.	nce. Include first mortgag	e 4. \$		500.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		481.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		200.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
5.	 Homeowner's association or condominium dues Additional mortgage payments for your residence, such 	as home equity loans	4d. \$ 5. \$		0.00

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Deb	otor 1	Diane R	Landry	Case	num	ber (if known)	
6.	Utiliti	ies:					
٥.	6a.		heat, natural gas		6a.	\$	200.00
	6b.		ver, garbage collection		6b.		75.00
	6c.		e, cell phone, Internet, satellite, and cable	e services	6c.	·	331.00
	6d.	Other. Spe			6d.	·	0.00
7.			ekeeping supplies		7.	·	600.00
8.			hildren's education costs		8.	\$	0.00
9.			ry, and dry cleaning		9.	\$	20.00
		•	roducts and services		10.	· —	250.00
		-	ntal expenses		11.	·	100.00
			Include gas, maintenance, bus or train f	are		<u> </u>	100.00
			ar payments.		12.	\$	350.00
13.			clubs, recreation, newspapers, magaz	ines, and books	13.	\$	0.00
14.			ributions and religious donations		14.	\$	0.00
15.	Insur	rance.	•				
	Do no	ot include in	surance deducted from your pay or inclu	ded in lines 4 or 20.			
	15a.	Life insura	nce		15a.	*	0.00
	15b.	Health ins	urance		15b.	\$	0.00
	15c.	Vehicle in:	surance		15c.	\$	92.00
	15d.	Other insu	rance. Specify:		15d.	\$	0.00
16.	Taxe	s. Do not in	clude taxes deducted from your pay or in	cluded in lines 4 or 20.			
	Spec	•			16.	\$	0.00
17.			ease payments:				
			ents for Vehicle 1		17a.		400.00
			ents for Vehicle 2		17b.	\$	0.00
	17c.	Other. Spe	ecify:		17c.	\$	0.00
		Other. Spe			17d.	\$	0.00
18.			of alimony, maintenance, and suppor		40	•	0.00
4.0			your pay on line 5, Schedule I, Your In		18.	5	
19.			s you make to support others who do	not live with you.		\$	0.00
	Spec	·		5 (11)	19.		
20.			erty expenses not included in lines 4				0.00
			s on other property		20a.		0.00
		Real estat			20b.	· .	0.00
			nomeowner's, or renter's insurance		20c.		0.00
			ice, repair, and upkeep expenses		20d.		0.00
			er's association or condominium dues	:	20e.	·	0.00
21.	Othe	r: Specify:			21.	_+\$	0.00
22	Calci	ulate vour	monthly expenses				
			through 21.			\$	3,599.00
			2 (monthly expenses for Debtor 2), if any	from Official Form 106J-2		\$	
			a and 22b. The result is your monthly ex			\$	2 500 00
	220. /	Auu IIIIe 22	a and 22b. The result is your monthly ex	penses.		Φ	3,599.00
23.	Calc	ulate your	monthly net income.				
	23a.	Copy line	12 (your combined monthly income) fron	Schedule I.	23a.	\$	3,656.00
	23b.	Copy your	monthly expenses from line 22c above.	:	23b.	-\$	3,599.00
							<u> </u>
	23c.	Subtract y	our monthly expenses from your monthly	income.			F7 00
		The result	is your monthly net income.	:	23c.	\$	57.00
0.4	_						
24.			an increase or decrease in your exper ou expect to finish paying for your car loan with				ease or decrease because of a
			ou expect to finish paying for your car loan with terms of your mortgage?	in the year or do you expect your mont	yaye (payment to more	ease of uecrease because of a
	■ No		· · · · · · · · · · · · · · · · · · ·				
			Explain horo:				
	□Y€	t5.	Explain here:				

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Fill in this infor	mation to identify your o	ase:				
Debtor 1	Diane R Landry					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS			
Case number						
(if known)					☐ Check if this is an	
					amended filing	
Official For	<u>m 106Dec</u>					
Declarat	tion About a	n Individual	Debtor's Scl	hedules	12/15	
			DODIO: 0 00.		12/13	
If two married n	eonle are filing together	both are equally respon	nsible for supplying corre	ect information		
	oop.ou.og togoo.	,	ionoro con portugues	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
				Making a false statement,		
			ruptcy case can result in	fines up to \$250,000, or i	mprisonment for up to 20	
years, or both. 1	18 U.S.C. §§ 152, 1341, 1	519, and 35/1.				
Sig	n Below					
Olg						
Did you na	ay or agree to hay some	one who is NOT an attor	ney to help you fill out ba	ankruntey forms?		
Dia you pe	ly or agree to pay some	one who is NOT an attorn	ley to help you lill out ba	inklupicy forms:		
■ No						
□ Yes.	Name of person Attac			Attach Rankruntcu	Petition Preparer's Notice,	
				Signature (Official Form 119)		
				•	,	
	alty of perjury, I declare t re true and correct.	hat I have read the sumi	nary and schedules filed	with this declaration and		
that they ar	o il do dila correcti					
	ne R Landry		X			
	R Landry		Signature of Debtor 2			
Signatu	re of Debtor 1					

Date

Date March 15, 2018

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Debtor 1	Diane R Landry			
	First Name	Middle Name	Last Name	
ebtor 2 pouse if, filing)	First Name	Middle Name	Last Name	
nited States	Bankruptcy Court for the:	NORTHERN DISTRICT OF I	LINOIS	
ase number				☐ Check if this is an amended filing
tateme			als Filing for Bankruptcy	4,
	f more space is needed, atta own). Answer every questio		form. On the top of any additional pages	s, write your name and case
art 1: Giv	e Details About Your Marita	I Status and Where You Liv	ed Before	
	e Details About Your Marita our current marital status?	ll Status and Where You Liv	ed Before	
What is y	our current marital status?	ll Status and Where You Liv	ed Before	
What is y ■ Marr □ Not	our current marital status?			
What is y Marr Not i	our current marital status? ied narried			
What is y Marr Not During th	our current marital status? ied narried	d anywhere other than whe	re you live now?	
What is y Marr Not During th No Yes.	our current marital status? ied married e last 3 years, have you live	d anywhere other than whe	re you live now?	Dates Debtor 2 lived there
What is y Marr Not During th No Yes. Debtor 1	our current marital status? ied narried e last 3 years, have you live List all of the places you live	ed anywhere other than whe d in the last 3 years. Do not in Dates Debtor 1	re you live now? clude where you live now.	

Case 18-07867 Doc 1 Filed 03/19/18 Entered 03/19/18 13:08:34 Desc Main Page 38 of 54 Case number (if known) Document Debtor 1 Diane R Landry Part 2 **Explain the Sources of Your Income** Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose," During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address** Dates of payment **Total amount** Amount you Was this payment for ... paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο Yes. List all payments to an insider. Amount you Insider's Name and Address Dates of payment **Total amount** Reason for this payment

still owe

paid

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8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		yments or transfer any	property on a	eccount of a dek	ot that benefited an
	■ No□ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	
Pa	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures	•			
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.					
	□ No ■ Yes. Fill in the details.					
	Case title	Nature of the case	Court or agency		Status of the	case
	Case number	Nature of the case	Court of agency		Otatus of the	Case
	Bankof New York Mellon v. Landry	Foreclosure	Grundy County C		☐ Pending	
	2015CH64		111 E Washingtor Morris, IL 60450	n St	On appea	
			,		Concluded	d
	Collection Professionals, Inc v.	Collection	Grundy County C	ourt	☐ Pending	
	Landry	Conconon	111 E Washingtor		☐ On appea	I
	2017SC525		Morris, IL 60450		■ Concluded	
	Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.	w.				
	Creditor Name and Address	Describe the Property	•	Date		Value of the
		Explain what happene	ad			property
	BANK OF NEW YORK MELLON 225 Liberty Street		uth Wilmington, IL 60	0474 03/2	7/18	Unknown
	Attn Bankruptcy	_				
	New York, NY 10286	☐ Property was reposs				
		■ Property was foreclo□ Property was garnis				
		☐ Property was attach				
		— Froperty was attach	eu, seizeu of levieu.			
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bed No Yes. Fill in the details.		cluding a bank or finan	cial institutio	n, set off any an	nounts from your
	Creditor Name and Address	Describe the action th	e creditor took	Date take	action was า	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a No Yes		perty in the possession			it of creditors, a

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Case number (if known) Document Debtor 1 Diane R Landry

Pai	t 5: List Certain Gifts and Contributions	\$			
13.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift.	ıptcy, (did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$600 per person)	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankru No Yes. Fill in the details for each gift or co		did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	otal	Describe what you contributed	Dates you contributed	Value
Pai	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankrup or gambling? No Yes. Fill in the details.	otcy or	since you filed for bankruptcy, did you lose any	thing because of the	it, fire, other disaster,
	Describe the property you lost and	Doscri	ibe any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred	Include	e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	loss	lost
Pai	t 7: List Certain Payments or Transfers				
16.	consulted about seeking bankruptcy or p	repari	id you or anyone else acting on your behalf pay on gar bankruptcy petition? The provided Hammar is a service of the service o		rty to anyone you
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Law Offices of Jeffrey L. Fisher 207 S. Water St. Wilmington, IL 60481 Mberardilaw@gmail.com		Attorney Fees	03/15/18	\$1,000.00
17.	Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that	itors o	id you or anyone else acting on your behalf pay or to make payments to your creditors? ted on line 16.	or transfer any prope	rty to anyone who
	No				
	Yes. Fill in the details.		Description and value of any analysis	Data naversant	A
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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Debtor 1 Diane R Landry

18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers mad include gifts and transfers that you have already No Yes. Fill in the details.	siness or financial affa le as security (such as the	i irs? he granting of a se			
	Person Who Received Transfer Address Person's relationship to you	Description and von		paymen	e any property or ts received or debts exchange	Date transfer was made
19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-protein No Yes. Fill in the details.		y property to a se	elf-settled	trust or similar device o	of which you are a
	Name of trust	Description and v	alue of the prope	erty transfe	erred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Insti	ruments, Safe Deposit	Boxes, and Stor	age Units		
 Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, b houses, pension funds, cooperatives, associations, and other financial institutions. No Yes, Fill in the details. 						
		Last 4 digits of account number	Type of accouninstrument	c r	Date account was closed, sold, noved, or ransferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables? No Yes. Fill in the details.	ear before you filed for		·	sit box or other deposi	
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Address (Number, St State and ZIP Code)		escribe th	e contents	Do you still have it?
22.	Have you stored property in a storage unit or No Yes. Fill in the details.	place other than your	home within 1 ye	ear before	you filed for bankrupto	y?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		escribe th	e contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control fo	or Someone Else				
23.	Do you hold or control any property that som for someone. No Yes. Fill in the details.	eone else owns? Inclu	ide any property	you borro	wed from, are storing f	or, or hold in trust
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, St Code)		escribe th	e property	Value
	t 10: Give Details About Environmental Infor					
	and parpose or rait to, the following definition	appij.				

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5 Case 18-07867 Doc 1 Filed 03/19/18 Entered 03/19/18 13:08:34 Desc Main Page 42 of 54 Case number (if known) Document

Debtor 1 Diane R Landry

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	haz	ardous material, pollutant, contaminant,	or similar term.		,,	,	
Rep	eport all notices, releases, and proceedings that you know about, regardless of when they occurred.						
24.	Has	any governmental unit notified you that	you may be liable or potentially liable	und	ler or in violation of an environme	ntal law?	
		No					
		Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	i	Environmental law, if you know it	Date of notice	
25.	Hav	re you notified any governmental unit of	any release of hazardous material?				
		No Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	i	Environmental law, if you know it	Date of notice	
26.	Hav	re you been a party in any judicial or adn	ninistrative proceeding under any envi	ronn	nental law? Include settlements a	nd orders.	
		No Yes. Fill in the details.					
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case	
Par	t 11:	Give Details About Your Business or	Connections to Any Business				
27.		— hin 4 years before you filed for bankrupt		v of	the following connections to any	husiness?	
21.	*****	A sole proprietor or self-employed in		•	•	business:	
		☐ A member of a limited liability comp			-		
		☐ A partner in a partnership		• `	•		
		☐ An officer, director, or managing exc	ecutive of a corporation				
		☐ An owner of at least 5% of the voting	or equity securities of a corporation				
		No. None of the above applies. Go to F					
		Yes. Check all that apply above and fill					
		siness Name dress	Describe the nature of the business		Employer Identification number Do not include Social Security		
		mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed		
28.		hin 2 years before you filed for bankrupt itutions, creditors, or other parties.	cy, did you give a financial statement t	o an	nyone about your business? Inclu	de all financial	
		No					
		Yes. Fill in the details below.					
	Ad	me dress mber, Street, City, State and ZIP Code)	Date Issued				
_							

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6

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Debtor 1 Diane R Landry

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Diane R Landry	
Diane R Landry	Signature of Debtor 2
Signature of Debtor 1	
Date March 15, 201	8 Date
Did you attach addition ■ No □ Yes	al pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)
Did you pay or agree to	pay someone who is not an attorney to help you fill out bankruptcy forms?
No	
Yes. Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	nation to identify your	case:		
Debtor 1	Diane R Landry			
	First Name	Middle Name	Last Name	_
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	_
		Middle Name	Lastivanie	
United States Ba	nkruptcy Court for the:	NORTHERN DIST	FRICT OF ILLINOIS	_
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo Statemer		n for Indiv	riduals Filing Under Cha	pter 7 12/15
	vidual filing under cha	• •	l out this form if:	
_	e claims secured by yo			
You must file this	ver is earlier, unless th	vithin 30 days after	ot expired. you file your bankruptcy petition or by the da e time for cause. You must also send copies	
•	ople are filing togethe date the form.	r in a joint case, bo	th are equally responsible for supplying corr	ect information. Both debtors must
	and accurate as possit our name and case nu		needed, attach a separate sheet to this form	n. On the top of any additional pages,
Part 1: List Yo	our Creditors Who Hav	e Secured Claims		
1. For any credito	ors that you listed in P	art 1 of Schedule D	: Creditors Who Have Claims Secured by Pro	pperty (Official Form 106D), fill in the
information be	low.		•	
Identify the cre	editor and the property t	hat is collateral	What do you intend to do with the property secures a debt?	y that Did you claim the property as exempt on Schedule C?
Creditor's B	ANK OF NEW YORK	(MELLON	■ Surrender the property.	□ No
name:			Retain the property and redeem it.	
			Retain the property and enter into a	■ Yes
	130 Lemmon Dr S		Reaffirmation Agreement.	
property securing debt:	Wilmington, IL 604 County	174 Grundy	☐ Retain the property and [explain]:	
securing debt.	,			
For any unexpire in the information	n below. Do not list rea	ase that you listed al estate leases. Un	in Schedule G: Executory Contracts and Undexpired leases are leases that are still in effethe trustee does not assume it. 11 U.S.C. § 36	ct; the lease period has not yet ended.
Describe your u	nexpired personal pro	perty leases		Will the lease be assumed?
Lessor's name:				□ N:
Description of lea	ased			□ No
Property:	-			☐ Yes
Lessor's name:				□ No
Description of lea Property:	asea			☐ Yes
·-F				LI 162
Lessor's name:				□ No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Deb	otor 1	Diane R Landry	Case number (if known)	
	scription	n of leased		☐ Yes
Des		ame: n of leased		□ No
Les	perty: ssor's na	ame: n of leased		☐ Yes ☐ No
	perty:	101100000		☐ Yes
Des	sor's na scription perty:	ame: n of leased		□ No □ Yes
Des	sor's na scription perty:	ame: n of leased		□ No □ Yes
Par	t 3:	Sign Below		
		alty of perjury, I declare that I I nat is subject to an unexpired I	re indicated my intention about any property of my estate that sec se.	cures a debt and any personal
X		iane R Landry e R Landry	Signature of Debtor 2	
		ature of Debtor 1	Data	
	Date	March 15, 2018	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-07867 Doc 1 Filed 03/19/18 Entered 03/19/18 13:08:34 Desc Main Document Page 50 of 54

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Diane R Landry		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COM	PENSATION OF ATTOR	NEY FOR DE	EBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2 compensation paid to me within one year before the be rendered on behalf of the debtor(s) in contemplat	filing of the petition in bankruptcy, o	r agreed to be paid	to me, for services rendered or	r to
	For legal services, I have agreed to accept		\$	1,000.00	
	Prior to the filing of this statement I have received			1,000.00	
	Balance Due		. \$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed c	compensation with any other person un	nless they are mem	bers and associates of my law	firm.
	☐ I have agreed to share the above-disclosed comp copy of the agreement, together with a list of the				A
5.	In return for the above-disclosed fee, I have agreed	to render legal service for all aspects	of the bankruptcy of	ease, including:	
	 a. Analysis of the debtor's financial situation, and r b. Preparation and filing of any petition, schedules, c. Representation of the debtor at the meeting of cr d. [Other provisions as needed] Negotiations with secured creditors reaffirmation agreements and applic 522(f)(2)(A) for avoidance of liens or 	statement of affairs and plan which needitors and confirmation hearing, and to reduce to market value; exentations as needed; preparation a	nay be required; any adjourned hea nption planning;	rings thereof;	
6.	By agreement with the debtor(s), the above-disclose Representation of the debtors in any any other adversary proceeding.			es, relief from stay actions	s or
		CERTIFICATION			
	I certify that the foregoing is a complete statement of conkruptcy proceeding.	of any agreement or arrangement for p	ayment to me for r	epresentation of the debtor(s) i	in
N	larch 15, 2018	/s/ Mark M. Berardi			
	ate .	Mark M. Berardi Signature of Attorney Law Offices of Jeff 207 S. Water St. Wilmington, IL 604 815-476-7635 Fax: Mberardilaw@gma Name of law firm	81 : 815-476-5090		

United States Bankruptcy CourtNorthern District of Illinois

Total District of Immors				
In re	Diane R Landry		Case No.	
		Debtor(s)	Chapter 7	
	VE	CRIFICATION OF CREDITOR M	MATRIX	
		Number of	f Creditors:	21
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credi	tors is true and corre	ct to the best of my
Date:	March 15, 2018	/s/ Diane R Landry Diane R Landry Signature of Debtor		

American Anesthesiology PO Box 120153 Bankruptcy Grand Rapids, MI 49528

Amsurg Surgery Center 998 129th Infantry Drive Bankruptcy Joliet, IL 60435

BANK OF NEW YORK MELLON 225 Liberty Street Attn Bankruptcy New York, NY 10286

Cap1/marcs Po Box 30253 Salt Lake City, UT 84130

Capital Accounts Po Box 140065 Nashville, TN 37214

Capital One 15000 Capital One Dr Richmond, VA 23238

Cda/pontiac 415 E Main St Streator, IL 61364

City of Kankakee PO Box 1053 Bankruptcy Mokena, IL 60448

Codilis and Association 15W030 N Frontage Rd Willowbrook, IL 60527

Coll Profsnl Po Box 416 La Salle, IL 61301 Collection Professiona Po Box 416 La Salle, IL 61301

Collection Professionals Inc PO Box 517 Bankruptcy La Salle, IL 61301

Comenity Bank/Inbryant Po Box 182789 Columbus, OH 43218

Comenitybank/venus Po Box 182789 Columbus, OH 43218

Comenitybank/victoria Po Box 182789 Columbus, OH 43218

Creditors Discount & A 415 E Main St Streator, IL 61364

Epic Group SC PO Box 120153 Bankruptcy Grand Rapids, MI 49528

Joliet Radiological 36910 Treasury Center Bankruptcy Chicago, IL 60694

Mediacom 3900 26th Ave Bankruptcy Moline, IL 61265

Pearblossom Private School PO Box 439 Bankruptcy Bogue Chitto, MS 39629 Riverside Medical Center PO Box 3495 Bankruptcy Toledo, OH 43607